

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 08/04/2008

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Businessowners	7,390,599	1.8
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

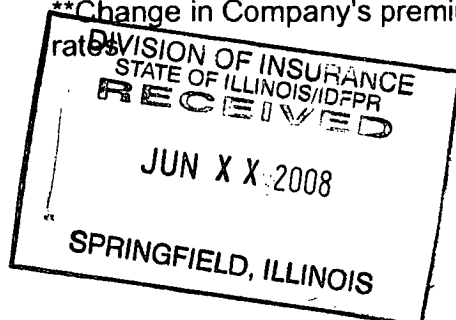
Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

Adopting ISO GL-2007-BGL1 and CF-2007-RLA1.

Our payroll basis for executive officers increased from 23,000 to 31,200. Loss cost multipliers and
package mod revised. Rating logic changed for CB-0457, CG-0456. Revised CB-7087, CB-7192

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new



ACUITY, A Mutual Insurance Company

Name of Company

Regulatory Filing Technician

Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

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	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Commercial Property	3,494,075	-16.9
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory

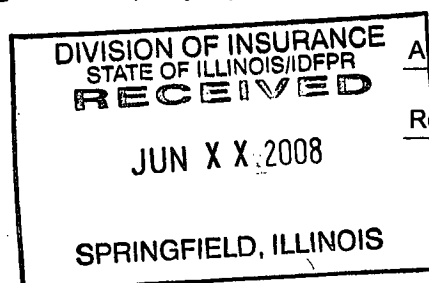
Organization, specify
organization):

Adopting ISO Commercial Fire and Allied Lines Loss

Cost Revision, CF-2007-RLA1

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.



ACUITY, A Mutual Insurance Company

Name of Company

Regulatory Filing Technician

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

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SUMMARY SHEET

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effective 08/04/2008

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Garage	86,395	-.9
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): Adopting CA-2008-BRLA1. Also revising loss costs and
loss cost expense factors

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

ACUITY, A Mutual Insurance Company

Name of Company

Regulatory Filing Technician

Official – Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 5/30/2008

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Motorcycle/Snowmobile/ATV</u>	<u>\$621,029 (2,527 policies)</u>	<u>3.7%</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _____

AMCO Motorcycle Program 2008 Revision -- With this revision we revised our base rates only. We are certifying that nothing has changed from our previously filed manual except for the base rates exhibit in the rates manual

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

AMCO Insurance Company

Name of Company

Monica Bildea - Product Manager

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 10/1/2008

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Businessowners</u>	<u>17,174,164</u>	<u>7.70%</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are increasing the base rates for all programs. We are revising class factors for the auto service and retail programs.

*Adjusted to reflect all prior rate changes.

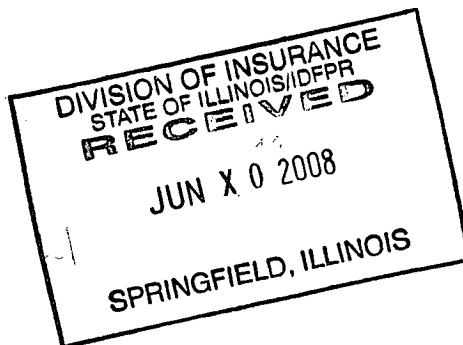
**Change in Company's premium level which will result from application of new rates.

AMCO Insurance Company

Name of Company

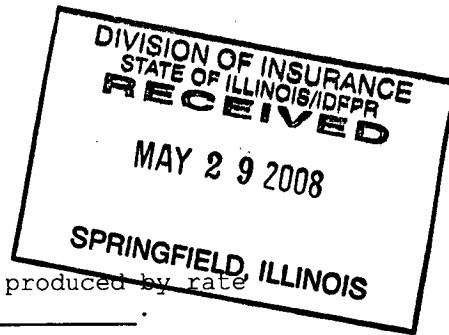
Marie Safreed, State Filing Specialist

Official – Title



Form (RF-3)

SUMMARY SHEET



Change in Company's premium or rate level produced by rate
revision effective 09/02/2008

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>General Liability</u>	<u>7,641</u>	<u>-9.8%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are revising the general liability rates/rules in Illinois. A companion forms filing was submitted under filing number GL IL0247901F01.

- * Adjusted to reflect all prior rate changes.
** Change in Company's premium level which will result from application of new rates.

American Alternative Insurance Corporation
Name of Company

Stephen J. Corbett - Vice President
Official - Title

H29219D

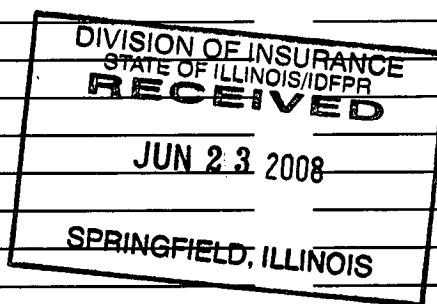
INS00106

SUMMARY SHEET

FORM (RF-3)

Change in Company's premium or rate level produced by rate revision
Effective September 1, 2008

(1)	(2)	(3)
<u>Coverage</u>	<u>Annual Premium Volume (Illinois)*</u>	<u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners (Earthquake only)		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Mobile Homeowners (Earthquake only)</u>	\$ 1,564,652	0.0%



Does filing only apply to certain territory (territories) or certain classes? No
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory
Organization, specify organization): Rate and Rule Revision for Earthquake Program and
Additional program and relativity changes including deductible options and zone
definitions.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will
result from application of new rates.

AMERICAN FAMILY MUTUAL INS. CO.
Name of Company

James P. Meyer

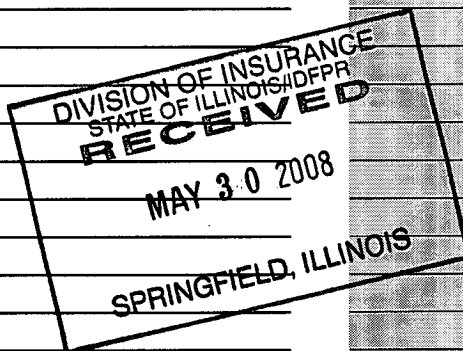
Official - Title
James P. Meyer, ACP, AIM
Senior Pricing Analyst/Filings

SUMMARY SHEET

FORM (RF-3)

Change in Company's premium or rate level produced by rate revision
Effective 7/1/2008 (New business and renewals)

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Mobile Homeowners</u>	1,580,521	+3.0



Does filing only apply to certain territory (territories) or certain classes? No
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): Filed for your information and review is a rate revision to our Mobile Homeowners Program in Illinois. The overall average rate level change associated with this filing is an increase of 3.0%, effective for both new and renewal business on July 1, 2008. Also included in this filing is the removal of the solid fuel surcharge.

* Written Premium - Adjusted to reflect all prior rate changes (Use calendar year-end premium from Premium Accounting Summary of QOR)

**Change in Company's premium level which will result from application of new rates.

AMERICAN FAMILY MUTUAL INS. CO.

Name of Company

Christa Adler

Competitive Pricing Research Analyst

Official - Title

SUMMARY SHEET

FORM (RF-3)

Change in Company's premium or rate level produced by rate revision
Effective September 1, 2008

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners (Earthquake only)		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Farm-Ranch</u>	\$ 1,880,870	-0.1%

Does filing only apply to certain territory (territories) or certain classes? No
If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory
Organization, specify organization): Rate and Rule Revision for Earthquake Program and
Additional Program and Relativity Changes - includes revision in base rates, offer of two
deductible options, revised zones & construction relativities, year built surcharge.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will
result from application of new rates.

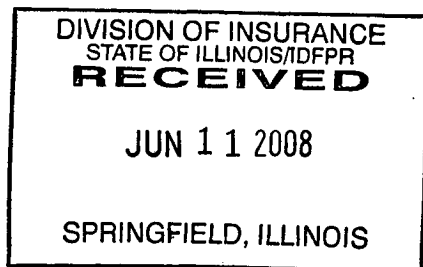
AMERICAN FAMILY MUTUAL INS. CO.

Name of Company

James P. Meyer

Official - Title

James P. Meyer, ACP, AIM
Senior Pricing Analyst/Filings



filing # RF3-FARM-09/01/08

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 7/1/2008

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>CPD Program</u>	<u>\$152,313</u>	<u>+2.4%</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No applies to all territories and classes

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Overall 2.4% rate increase

*Adjusted to reflect all prior rate changes.

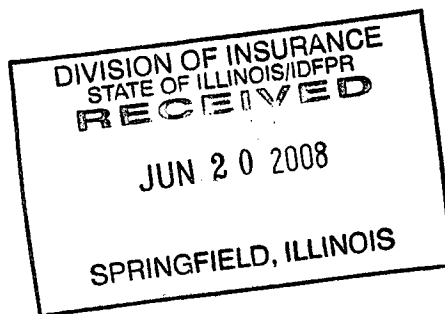
**Change in Company's premium level which will result from application of new rates. \$3,656

American Modern Home Insurance Company

Name of Company

Traci Burbage – Compliance Analyst

Official – Title



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 5/30/2008

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Motorcycle/Snowmobile/ATV</u>	<u>\$102,147 (452 policies)</u>	<u>3.4%</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _____

Depositors Insurance Company Motorcycle Program 2008 Revision -- With this revision we revised our base rates only. We are certifying that nothing has changed from our previously filed manual except for the base rates exhibit in the rates manual

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Depositors Insurance Company

Name of Company

Monica Bildea - Product Manager

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/1/2008

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Businessowners</u>	\$23,029	+102.1%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

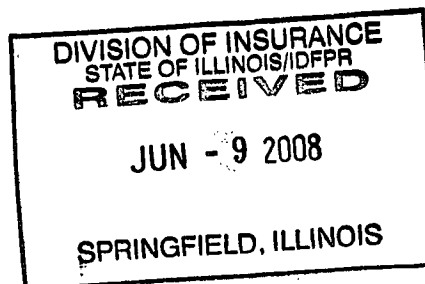
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _____
Adoption of ISO Loss Cost BP-2008-RLA1 and Revise Loss Cost Multipliers

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Employers Insurance Company of Wausau
Name of Company

Ellen Marcott State Filings Analyst
Official - Title



Form (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective
December 1, 2008 new and January 1, 2009 renewal

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -) **
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Travel Trailer</u>	\$785,021	+3.08%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Rate adjustment to Collison and Other Than Collision

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from applicable of new rates.

Foremost Insurance Company
Grand Rapids, Michigan
Name of Company

David J. Kelly – Assistant Vice-President

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective
December 1, 2008 new & January 1, 2009 renewal.

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -) **
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Travel Trailer</u>	\$ 619,416	2.13%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):
Introducing new rating structure

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from applicable of new rates.

Foremost Insurance Company
Grand Rapids, Michigan
Name of Company

David J.Kelly – Assistant Vice-President

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 5/30/2008

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Motorcycle/Snowmobile/ATV</u>	<u>\$262,466 (937 policies)</u>	<u>3.6%</u>
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _____

Nationwide Property and Casualty Motorcycle Program 2008 Revision -- With this revision we revised our base rates only. We are certifying that nothing changed from our previously filed manual except for the base rates exhibit in the rates manual

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Nationwide Property and Casualty Insurance Company

Name of Company

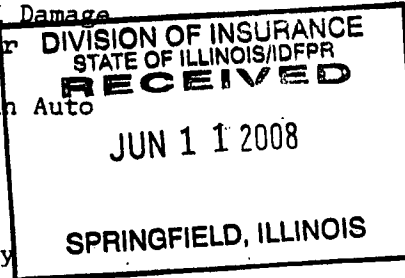
Monica Bildea - Product Manager

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 8-1-08 New; 9-15-08 Renewal.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Commercial Umbrella		
Line of Insurance	\$3,062,623	-11.5%



Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Revise minimum premiums, judgement modifications and
rating rules.

*Adjusted to reflect all prior rate changes.
**Change in Company's premium level which will
result from application of new rates.

PEKIN INSURANCE COMPANY
Name of Company

Robert M. McGann
Official - Title

R.M. McGann - Directory of Pricing & Regulatory Filings,
Assistant Secretary

RECEIVED

JUN - 4 2008

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELDChange in Company's premium or rate level produced by rate
Revision effective 06/01/2008 New Business and 09/01/2008 Renewals.

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Commercial Umbrella _____	\$160,118	+ 5.0%
Line of Insurance _____		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Yes. Habitational minimum premium per unit has increased from \$10 to \$20 per unit.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revised minimum premiums for Commercial Umbrella Program.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.Rockford Mutual Insurance Company
Name of CompanyJames D. Robbins,
Manager of Research and Development
Official - Title

RECEIVED

JUN - 9 2008

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Change in Company's premium or rate level produced by rate

Revision effective 06/01/2008 New Business; 07/01/2008 Renewals

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Boat/</u>	\$63,922	23.3%
<u>Recreational Vehicle</u>	\$56,156	3.5%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Revised liability and physical damage rates for boat & recreational vehicle. **Competitive analysis, rates last revised April 1996.**

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Rockford Mutual Insurance Company

Name of Company

James L Mayzer

Director of Research and Development-Personal Lines

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective August 1, 2008

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>SCP</u>	<u>\$513,331</u>	<u>-10%</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: No

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Rate decrease of 10%

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.



Safeco Insurance Company of America
Name of Company

Judy D. Hastings, CIC, Commercial Lines Analyst
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 11/1/2008

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Businessowners</u>	\$29,967	-51.7%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _____
Adoption of ISO Loss Cost BP-2008-RLA1 and Revise Loss Cost Multipliers

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

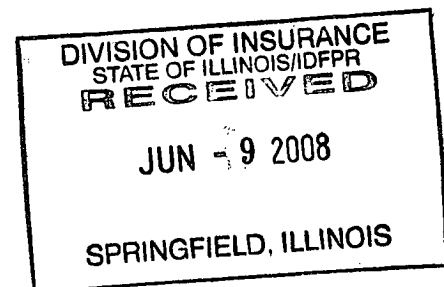
Wausau Business Insurance Company

Name of Company

Ellen Marcott

State Filings Analyst

Official - Title



ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 11/1/2008

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Businessowners</u>	\$20,734	-10.2%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

 Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _____
Adoption of ISO Loss Cost BP-2008-RLA1 and Revise Loss Cost Multipliers

*Adjusted to reflect all prior rate changes.

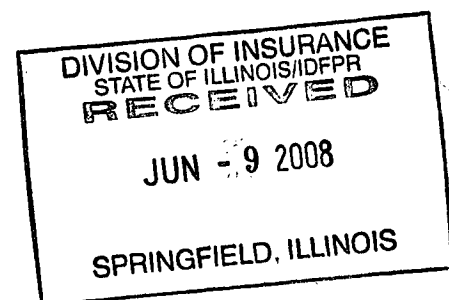
**Change in Company's premium level which will result from application of new rates.

Wausau Underwriters Insurance Company

Name of Company

Ellen Marcott
State Filings Analyst

Official - Title



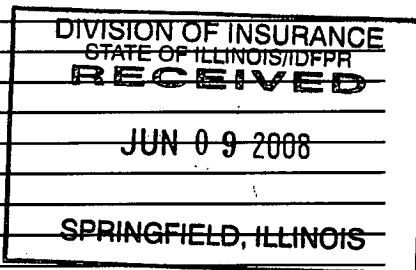
ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

8/15/08
New/RNB
~~-2.6~~

Change in Company's premium or rate level produced by rate revision effective _____

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial	0	0.0%
2. Automobile Physical Damage Private Passenger Commercial	0	0.0%
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Professional Liability</u> Line of Insurance		-2.6%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are filing a rate revision to our Small Firms, Architects, Consultants & Engineers Program. Changes are being made to the expense factors and minimum premiums. A slight change is being made to the language in the premium calculation section item c. A revised state rate manual is attached. We expect the overall impact from these change in Illinois to be -2.6%.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

XL Specialty Insurance Company

Name of Company

Boyd Adams, Assistant Vice President

Official - Title